

Amendments to the Specification:

Please replace the title with the following:

~~PLACEMENT STRUCTURE FOR FACILITATING METHOD OF PLACING
PLACEMENT OF AN IMPLANTABLE DEVICE PROXIMATE TO
NEURAL/MUSCULAR TISSUE FOR AFFECTING AND/OR SENSING
NEURAL/MUSCULAR TISSUE~~

Please amend paragraph 0054 as follows:

FIG. 37 shows a next alternative implementation of that which is functionally described in relation to **FIGS. 35 and 36** to the extent that it too is an integral device but it has its elastic wings 504 formed from a ~~silicon~~silicone rubber impregnated cloth that is permanently attached to the functional equivalent of the implantable medical device which was described in reference to **FIGS. 10A-10D**.

Please amend paragraph 0117 as follows:

FIGS. 25-34 are directed to a placement structure 500 that is useful for placing and retaining one of the aforementioned implantable devices 100 in close proximity to a nerve, muscle tissue, or the like, i.e., neural / muscular tissue. For the purposes of this application neural / muscular tissue is understood to signify tissue that passes or responds to neural signals which includes nerve fibers or muscle tissue or any combination thereof. This structure 500 may present additional benefits, e.g., higher sensing sensitivity or lower stimulation power and thus longer battery life between chargings. The placement structure 500 is preferably comprised of two main portions: (1) a holder 502 for holding and retaining the implantable device 100 within and (2) one or more sets (e.g., pairs) of wings 504 for capturing neural / muscular tissue. Preferably, the placement structure 500 is primarily formed from ~~of~~a biocompatible plastic, e.g., ~~silastic~~SILASTIC®, a registered trademark of Dow Corning, that is elastic and is

also an electrical insulator. In an exemplary embodiment, the holder 502 is essentially semi-circular in cross section and has a hollow cavity 506 having end plates 508 and 510 that essentially conforms to the size and shape of implantable device 100 such that the implantable device 100 may be snapped into the cavity 506 and is held by the elasticity of the holder 502 (see **FIGS. 25 and 26** which show the insertion of the implantable device 100 into the cavity 506 of the holder 502 of the placement structure 500. It should be noted that while the exemplary capture device 500 is shown for holding an implantable device 100 having a circular cross section, it should be readily apparent to one of ordinary skill in the art that this exemplary structure is readily alterable to accommodate devices having non-circular cross sections as well.

Please amend paragraph 0128 as follows:

FIG. 37 shows a next alternative implementation of an integral device 650 similar to that shown in **FIG. 36** to the extent that it too is an integral device but in this case it has its elastic wings 504 formed from a silicon-silicone rubber impregnated cloth that is permanently attached to the functional equivalent of the implantable medical device 100" described in reference to **FIG. 35**. In most other aspects, this embodiment is functionally equivalent to that which has been previously described.